

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <div style="text-align: center;">Hot Springs Star</div>		2. DATE <div style="text-align: center;">10/01/07</div>
3. FREQUENCY OF ISSUE <div style="text-align: center;">Weekly</div>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <div style="text-align: center;">52</div>	3B. ANNUAL SUBSCRIPTION PRICE \$ 36.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <div style="text-align: center;">107 N Chicago St, Hot Springs, Fall River, SD 57747</div>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <div style="text-align: center;">107 N Chicago St, Hot Springs, Fall River, SD 57747</div>		
6. FULL NAME OF PUBLISHER: <div style="text-align: center;">Brett Nachtigall</div>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME	COMPLETE MAILING ADDRESS	
Lee Enterprises	201 N Harrison St STE 600, Davenport, IA 52801	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <div style="text-align: center;">Attached</div>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	2,391	2,264
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	1,253	1,251
2. Mail Subscription (Paid and or requested)	785	760
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	2,038	2,011
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	14	14
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	2,052	2,025
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	107	110
2. Return from News Agents	232	129
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	2,391	2,264

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Brett Nachtigall
(Signature)

Publisher
(Title)

State of South Dakota)

County of Fall River)

(Seal)

Sworn to before me this 28 day of Sept, 2007

Darr S. Ferebee
Notary Public

My commission expires: 11-24-2010

